



Trophy List Form



If you are in mathematical contention for first or second place in your division, please fill out (below) the names of those who are on your team, and send in with your weekly results by the **2nd to last week of the season (or sooner)**.

Please Print Clearly: The PDA will not be responsible for any incorrect spelling errors.

TEAM AWARD

	First Name	Last Name	Plaque	Trophy	Gift Certificate	Do you have Special Achievement Plaque?
Captain	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			Total	_____	_____	_____

Tuesday nights are entitled to two (2), Thursday nights are entitled to four (4), Wednesday night to five (5) trophy's or plaques. If you wish to order extra trophy's or plaques they must be paid for at the end of the season. Contact a board member for prices. Gift certificates will be in the amount of the cost of your trophy and be redeemed at the Dart Shop.

Sponsor's Name (Bar) _____

Night of Play Tuesday: _____ Wednesday: _____ Thursday: _____

Team Name _____

Division & Season _____

Comments, suggestions, or requests:
